

247215

The UPS Store #2658
262 Eastgate Dr.
Aiken, SC 29803
803-642-0069 Tel
803-642-0045 Fax



Fax Cover

The UPS Store

To: PUBLIC SERVICE COMMISSION SC Fax #: 803-896-5799

Date: 10/15/13

of Pages (including cover sheet): 3

HILLIARD KRECKER

From: MAGNOLIA CHAUFFEUR + LINEN Phone #: 803-220-4600

Subject: EXTENSION

New Name.
New Low UPS® Rates.
Same Helpful Services.

If you are not the intended recipient, do not disclose, copy, distribute or use this information. If you received this transmission in error, please call immediately to arrange return of the documents at no cost to you.

REQUEST FOR EXTENSION TO COMPLY WITH ORDER (ORS Rev 3-2-10)

2012-398-T

File the original with: Public Service Commission of South Carolina Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199	Mail or fax a copy to: S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
--	--

DATE: 10/15/13

The S.C. Public Service Commission issued a Certificate of Public Convenience and Necessity
in Order # 2012-912 dated 12/13/12 for the following type of certificate:

☐ Class C Taxi ☒ Class C Charter ☐ Class C Charter Bus ☐ Class C Non-Emergency
☐ Class C Stretcher Van

Pursuant to that Order, the following carrier was given ninety (90) days from the date of the Order to comply with the requirements of certification.

Please consider this as a request for an extension until 11/15/13 to allow
(DATE)

EXTENSIONS ARE NOT EFFECTIVE UNTIL APPROVED BY THE PUBLIC SERVICE COMMISSION.

MAGNOLIA CHAUFFEUR+LIVERY
(Name of Company)

D/B/A _____
(if applicable)

137 SWEET GUM LN.
(Street Address)

(Mailing Address, City, State, Zip)

AIKEN SC 29803
(City, State, Zip Code)

[Signature]
(Signature)

800 624 1622
(Telephone Number)

PRESIDENT
(Title) Owner, President, etc.

Reason for Request for Extension to comply with PSC Order:

INSURANCE FORM E HAS BEEN FAXED IN
LICENSE DECAL APPLICATION FORM+ FEE HAVE BEEN MAILED
ADDITIONAL TIME IS NEEDED TO CO-ORDINATE INSPECTION
W/ OFFICER JERRY HALLMAN

Form E
UNIFORM MOTOR CARRIER BODILY INJURY AND PROPERTY
DAMAGE LIABILITY CERTIFICATE OF INSURANCE

(Executed in Triplicate)

S.C. Office of Regulatory Staff
1401 Main St., Suite 900
Filed with Columbia, SC 29201 (hereinafter called Commission)
(Name of Commission)

This is to certify, that the LANCER INSURANCE COMPANY
(Name Of Company)

(hereinafter called Company) of 370 WEST PARK AVENUE, LONG BEACH, NY 11561
(Home Office Address of Company)

has issued to Magnolia Chauffeur & Livery, LLC of 137 Sweet Gum Lane, Aiken, SC 29803
(Name of Motor Carrier) (Address of Motor Carrier)

a policy or policies of insurance effective from 10/15/2013 12:01 A.M., standard time at the address of the insured stated in said policy or policies and continuing until canceled as provided herein, which, by attachment of the Uniform Motor Carrier Bodily Injury and Property Damaged Liability Insurance Endorsement, has or have been amended to provide automobile bodily injury and property damaged liability insurance covering the obligations imposed upon such motor carrier by the provisions of the motor carrier law of the State in which the Commission has jurisdiction or regulations promulgated in accordance therewith.

Whenever requested, the Company agrees to furnish the Commission a duplicate original of said policy or policies and all endorsements thereon.

This certificate and the endorsement described herein may not be canceled without cancellation of the policy to which it is attached. Such cancellation may be affected by the Company or the Insured giving thirty (30) days' notice in writing to the State Commission, such thirty (30) days' notice to commence to run from the date notice is actually received in the office of the Commission.

Countersigned at 370 WEST PARK AVENUE LONG BEACH NY 11561
(Street Address) (City) (State) (Zip Code)

this 15th day of October 2013

Insurance Company File No. BA167002
(Policy Number)


(Authorized Company Representative)